Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN

APPLICATION DATA SHEET (37 CFR 1.76) As the below named inventor(s), I/we declare that: declaration is directed to: The attached application, or 166 Application No. 10/075, 686, filed on February 14, 2002 as amended on if applicable); I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought; I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above; I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon. Full Name of Inventor(s) Inventor 1 James G. Boyd Signature Citizen of

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

US

Citizen of

Inventor 2

Signature

David H. Singleton

Additional inventors are being named on



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	NOT YET ASSIGNED
Filing Date	CONCURRENTLY HEREWITH
First Named Inventor	James G. Boyd, et al.
Title	A NOVEL INHIBITOR OF BETA AMYLOID CLEAVAGE ENZYME
Group Art Unit	NOT YET ASSIGNED
Examiner Name	NOT YET ASSIGNED
Attorney Docket Number	PC23001A

				Examiner Name		NOT YET ASSIGNED			
_				Attorney Docket Nur		Number	PC23001A		
I hereb	y appoint:	-				•			
\boxtimes	Practitioners at Cus	tioners at Customer Number		23913					
	Practitioners named	s named below:							
	, , , , , , , , , , , , , , , , , , , ,	Name			Registrati	on Number		1	
		Hamo			regionation Number				
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.									
Plea	se change the corres	pondence address for the	ne ab	ove-identif	ied appli	cation to:			
The above-mentioned Customer Number. OR									
OR	Practitioners at Cus	stomer Number							
	Firm or Individual Name								
Addr	ess								
Addı	ess								
City				Sta	te		Zip		
Cou	ntry							_	
Tele	phone			Fax			_		
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
SIGNATURE of Applicant or Assignee of Record									
Name James G. Boyd									
Sign	ature	Jones L	<u> </u>	320					<u> </u>
Date		102/25/2	00	7(
		ntors or assignees of recor ire is required, see below		he entire into	erest or th	eir represer	ntative(s) are re	quired. S	ubmit multiple
☐ *Tota	l of forms are sub	mitted.							

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC

			TO/SB/8	
pve	ed for use through	10/31/2002.	OMB 06	51-003
Patent and The mar	k Office: U.S. DEF	PARTMENT	OF COM	MERCE

Please type a plus sign (+) inside this box		Pater	nt and The	nark Office: U.S	B. DEPARTMENT OF COMMERCE	
	Applica	Application Number		NOT YET ASSIGNED		
	Filing D	ate		CONCURRENTLY HEREWITH		
	First Na	med Inve	entor	James G. I	Boyd, et al.	
POWER OF ATTORNEY OR	Title	Title			A NOVEL INHIBITOR OF BETA AMYLOID CLEAVAGE ENZYME	
AUTHORIZATION OF AGENT	Group A	Group Art Unit		NOT YET ASSIGNED		
0157	Examine	Examiner Name		NOT YET ASSIGNED		
• /	Attorne	Docket	Number	PC23001	4	
I hereby appoint:			_			
Practitioners at Customer Number OR	2391	3				
Practitioners named below:						
Name			Registrati	on Number		
as my/our attorney(s) or agent(s) to prosecute the	numlination ida	ما بدائد المائد الم		- 4	11	
business in the United States Patent and Trademar				o transact a	lIII	
Please change the correspondence address for the	e above-identi	fied appli	cation to:			
The above-mentioned Customer Number.		oo app				
OR						
Practitioners at Customer Number					- ▶	
			J			
OR						
Firm or Individual Name						
Address						
Address						
City	Sta	ate		Zip		
Country				· · · · · · · · · · · · · · · · · · ·		
Telephone	Fax	× T				
	1 1 4					
I am the:						
		_				
I am the:		1				
I am the: Applicant/Inventor.	37 CFR 3.71.					
I am the: Applicant/Inventor. Assignee of record of the entire interest. See	37 CFR 3.71. . (Form PTO/S	SB/96).	of Recor	d		
I am the: Applicant/Inventor. Assignee of record of the entire interest. See Statement under 37 CFR 3.73(b) is enclosed. SIGNATURE of A	37 CFR 3.71. . (Form PTO/S	SB/96).	e of Recor	d		
I am the: Applicant/Inventor. Assignee of record of the entire interest. See Statement under 37 CFR 3.73(b) is enclosed. SIGNATURE of A	37 CFR 3.71. . (Form PTO/S	SB/96).	e of Recor	d		
I am the: Applicant/Inventor. Assignee of record of the entire interest. See Statement under 37 CFR 3.73(b) is enclosed. SIGNATURE of A	37 CFR 3.71. (Form PTO/S	SB/96).	e of Recor	d		

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC

forms are submitted.